
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: MATTICE, Harold E. et al.

Attorney Docket No.: IGT1P210/P000864-001

Application No.: 10/804,689

Examiner: Malina K. Rustemeyer

Filed: March 19, 2004

Group: 3714

Title: TOUCH SCREEN APPARATUS AND METHOD

Confirmation No.: 9156

CERTIFICATE OF EFS-WEB TRANSMISSION

I hereby certify that this correspondence is being transmitted electronically through EFS-WEB to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on June 10, 2010.

Signed: /Michelle Heymann/
Michelle Heymann

**REQUEST FOR CONTINUED EXAMINATION (RCE)
(37 CFR §1.114)**

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) of the above-identified application.

1. Submission required under 37 C.F.R. §1.114:

- a. ☐ Previously submitted
 - i. ☐ Consider the amendment/reply under 37 C.F.R. §1.116 previously filed on _____.
(Any unentered amendment referred to above will be entered.)
 - ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on ____.
 - iii. ☐ Other _____.
- b. ☒ Enclosed
 - i. ☐ Amendment/Reply
 - ii. ☐ Affidavit/Declaration
 - iii. ☒ Information Disclosure Statement with Form PTO-1449
☒ Copies of IDS Citations
 - iv. ☐ Other _____.

2. **Fees:** (The RCE fee is required at the time the RCE is filed.)

Fee Calculation (37 CFR §1.16)

| | Claims After Amendment | | Highest Previously Paid For | Present Extra | Large Entity Rate Fee |
|--|---------------------------|-------|--------------------------------|------------------|--------------------------|
| Total Claims | 13 | MINUS | 45 | 0 | x 52 = 0 |
| Independent Claims | 1 | MINUS | 4 | 0 | x 220 = 0 |
| Multiple Dependent Claim Present and Fee Not Previously Paid | | | | | \$0 |
| Fee for Request for Continued Examination Under 37 C.F.R. §1.17(e) | | | | | \$810.00 |
| Fee for Extension of Time | | | | | \$0 |
| TOTAL | | | | | \$810.00 |

- ☐ a. Applicant hereby petitions for a one-month extension of time.
- ☒ b. Applicant believes that no (additional) extension of time is required; however, if it is determined that such an extension is required, Applicant hereby petitions that such an extension be granted and authorizes the Director to charge the required fees for an extension of time under 37 CFR §1.136 to Deposit Account No. 504480.
- ☐ c. Enclosed is our Check No. _____ in the amount of \$ _____ to cover the RCE fee, extension of time and additional fees.
- ☒ d. The Commissioner is authorized to charge the amount of \$810.00 to cover the RCE fee, or any fees beyond the amount enclosed which may be required, or to credit any overpayment, to Deposit Account No. 504480 (Order No. IGT1P210/P000864-001).
3. ☒ Please continue to send correspondence to the following address:

Customer Number 79646

79646

/Reginald J. Suyat/
Reginald J. Suyat
Registration No. 28,172

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